

GIRL SCOUTS—ARIZONA CACTUS-PINE COUNCIL, INC.  
**ADULT EDUCATIONAL OPPORTUNITY  
 REGISTRATION FORM**

For Office Use Only
Date Rec'd: _____
Amt Enclsd: _____
Check #: _____

Course \_\_\_\_\_ Name \_\_\_\_\_  
 Date & Time \_\_\_\_\_ Address \_\_\_\_\_  
 Training Location \_\_\_\_\_ City, State & Zip \_\_\_\_\_  
 Neighborhood \_\_\_\_\_ Phone (Home) \_\_\_\_\_  
 G.S. Position \_\_\_\_\_ Phone (Work) \_\_\_\_\_  
 Troop # & Program Level \_\_\_\_\_  
 Email \_\_\_\_\_  
 If applicable: \_\_\_\_\_ fee with registration Special Needs \_\_\_\_\_

**Leadership Training Completed:**

Welcome to Girl Scouting Date \_\_\_\_\_  Program Level Training \_\_\_\_\_/Date \_\_\_\_\_  
 Basic Troop Management Date \_\_\_\_\_  Troop Camp Certification Date \_\_\_\_\_

For Trainer's Use	<input type="checkbox"/> Completed	<input type="checkbox"/> Cancelled	<input type="checkbox"/> No Show
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AE-02 af GSACPC 6/05

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